



JRTC & FORT POLK



BASE OPS SAFETY BULLETIN COMMAND SAFETY OFFICE

May-Jun 07

Special Points of Interest

- Will More Orange Cones Bring More Roadway Deaths

- OSHA Recordkeeping – Quick Reference Guide

Safety problem?
Call 531-2536/1981

We are at a time when there is a need for direct and honest information to both the public and the construction sector. With the funds for massive Indiana highway development fairly secured, Indiana is looking at an increase in highway and road work that will have a major impact throughout the state. We are truly fortunate to have this opportunity before us. However, with this opportunity there are consequences. As the funding is increased and the number of highway projects are increased, we are faced with the possibility of an equal increase in the number of highway work related accidents and deaths. Contrary to some beliefs, it is not just the highway construction workers that face death and serious injury at road construction sites. Surprisingly, an estimated 90% of construction-zone deaths involve motorists rather than construction workers. Motorists killed each year in construction zones represent about 2% of all fatal accidents in the nation. In 2004, 1,068 people — drivers and construction workers — died in highway work zones. Being faced with an increase in highway construction, are we accepting the fact that as the increase goes up, accidents and deaths will go up proportionally. Will our only course of action consist of telling people to slow down in work zones? There is good news. We are fortunate in Indiana that we have an active organization that is already addressing these issues and working to take the actions needed. The Louisiana Constructors Inc. Safety Council is working so that we can see a downward trend in highway work zone accidents even as there is a significant increase in projects. Many means are available to provide safer work zones in highway construction. All options are being explored to keep the public and the workers safe, and will involve both the construction companies and motorists. There are actions that can affect change and reduce the rate of work zone accidents.





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OSHA Recordkeeping – Quick Reference Guide

The rules regarding OSHA recordkeeping and recordables seem to be an ongoing headache and concern for companies. The following is a “cheat sheet” of ways to get these questions answered:

OSHA 300 Log:

Replaced the 200 Log, effective January 2002

What has changed?

More strict definitions:

Work environment-establishment or other locations...present...as a condition of employment. (Basically, the injury has to be related to the current job).

Therefore no recording if:

- Self-inflicted
- During commute (parking lot)
- Present as “general public”

General Rule:

REPORT MEDICAL TREATMENT

DON'T REPORT FIRST AID

What is First Aid?

Using a nonprescription medication at a nonprescription strength.

Administering tetanus immunizations

Cleaning, flushing, or soaking wounds on the surface of the skin.

Using wound coverings such as bandages, gauze pads, etc.; or using butterfly bandages or Steri-Strips

Using Hot or Cold Therapy

Using any non-rigid means of support, such as elastic bandages, wraps, non-rigid back belts, etc.

Using temporary immobilization devices while transporting an accident victim (e.g., splints, slings, neck collars, back boards, etc.)

Drilling of a fingernail or toenail to relieve pressure or draining fluid from a blister

Using eye patches

Removing foreign bodies from the eye using only irrigation or a cotton swab.

Removing splinters or foreign material from areas other than the eye by irrigation, tweezers, cotton swabs or other simple means

Using finger guards

Using Massages (physical therapy or chiropractic treatment are considered medical treatment for recordkeeping purposes)

Drinking fluids for relief of heat stress.

Real Life (hurt at work or play?)

Work or Home... You decide

Preexisting condition ...

No medical treatment required BEFORE the workplace exposure...

Restrictions that would not have happened except for work activities



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Recording Injuries and Illnesses

- ☐ You are not required to record injuries and illnesses if:
 - ☐ At the time of the injury or illness, the employee was present in the work environment as a member of the general public.
 - ☐ The injury or illness involves signs or symptoms that surface at work but result solely from a non-work related event or exposure that occurs outside of the work environment.
 - ☐ The injury or illness results solely from the voluntary participation in a wellness program or in medical, fitness, or recreational activity such as blood donation, physical examination, flu shot, exercise class, racquetball, or baseball.
 - ☐ The injury or illness is solely the result of an employee eating, drinking, or preparing food or drink for personal consumption.
 - ☐ The injury or illness is solely the result of an employee doing personal tasks at the establishment outside of the employees assigned working hours.
 - ☐ The injury or illness is solely the result of personal grooming, self medication for a non-work-related condition, or is intentionally self-inflicted
 - ☐ The injury or illness is caused by a motor vehicle accident and occurs on a company parking lot or company access road while the employee is commuting to or from work
 - ☐ The illness is the common cold or flu
 - ☐ The illness is a mental illness. Mental illness will not be considered work-related unless the employee voluntarily provides the employer with an opinion from a physician or other licensed health care professional with appropriate training and experience stating that the employee has a mental illness that is work related.

OSHA's Basic Rule:

- ☐ The **DOCTOR's** opinion counts most!
- ☐ What if the employee is told to stay home and yet comes to work?
 - Employees must have a work release from their physician to come back to work. Always use the original doctor's statement, for example, if the doctor says the employee must miss 3 days of work, and he doesn't miss any because he continues to work, you count the 3 days on the log regardless. If an employee returns to work without being released, you may send that employee home.
- ☐ How do you count LOST and RESTRICTED work days?
 - There is a cap at 180 days. If the restriction goes beyond that, you may stop counting. Always count calendar days.

Doctors are important to the record keeping process

- ☐ Restricted work days are recorded.
- ☐ You keep the employee away from scheduled work,
- ☐ Doctor recommends an employee not perform a certain routine function,
- ☐ Routine functions are tasks that employees do at least once per week

Significant changes from 200 to 300:

- ☐ Changes regarding lost/restricted work
 - Change in terminology
 - Eliminates "lost workdays"
 - Focuses on "days away" or "days restricted or transferred"
 - Includes new regulations for counting days
 - Rely on calendar days instead of workdays
- ☐ Changes to employer requirements
 - Employers must establish procedure for employees to report injuries and illnesses.



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- ▶ Employers must tell employees how to report
- ▶ Employers are prohibited from discriminating against employees who report
 - ▶ With change of ownership, seller must turn over OSHA records to buyer.
 - ▶ Changes to employee rights
 - ▶ Privacy rights (i.e.: 300A, summary sheet)
 - ▶ Prohibits employers from entering an individual employee's name on Form 300 for certain types of injuries/illnesses
 - ▶ Sexual assaults
 - ▶ HIV infections
 - ▶ Mental illness
 - ▶ Provides employers the right not to describe the nature of sensitive injuries where the employee's identity would be known.
 - ▶ Gives employee access to portions of Form 301 relevant to the employee they represent
- ▶ Requires employers to remove employees' names before providing data to persons not provided access under the rule (i.e.: lawyer)
- ▶ Requires the annual summary to be posted for three months (Feb. 1 to April 30) instead of one
- ▶ Requires certification of annual summary by a company executive
- ▶ Changes reporting of fatalities and catastrophes to exclude some motor carrier and motor vehicle incidents
- ▶ Allows all forms to be kept on computer equipment or at alternate location
- ▶ Form 300A
- ▶ Requires increased employer review of data and additional data on the average employment/hours worked at establishment
- ▶ Changes result in higher quality data, but more time and cost to employer
- ▶ Changes to the definitions of medical treatment and first aid (*will result in more cases being recorded*)

Areas of Potential Cost Increases:

- ▶ Change to the criteria for recording needle stick and sharps injury (*will result in more cases being recorded*)
- ▶ Increased employee involvement
- ▶ Employee privacy protections

Bloodborne Pathogen Standard:

An employer can choose to keep a separate sharps injury log to satisfy the requirements of 29 CFR 1910.1030, in addition to recording injuries on the OSHA 300 Log of Work-Related Injuries and Illnesses.

Basically, you need 2 logs:

OSHA 300 LOG	SHARPS INJURY LOG
On case line. Write "Privacy Case"	Name of Employee
Reference to "Sharp's Injury Log"	Where the incident occurred
Do not fill in all information listed	When the incident occurred
	What was the sharp....Who did it belong to
	Reference to case line on 300 Log